

LONG TERM CARE COMMUNITY COALITION

Advancing Quality, Dignity & Justice

Issue Alert: Pressure Ulcers

I. What are Pressure Ulcers?

Nursing home residents are typically very vulnerable and require 24-hour a day skilled nursing and monitoring. Most of them are at risk for developing pressure ulcers. Thus, pressure ulcers (also known as “bed sores”) are an ongoing, significant concern for nursing home residents and their families. In particular, they **pose a serious health risk for nursing home residents**, which can result in complications from skin loss to deadly infections.

Pressure ulcers occur when there is damage to an individual’s skin or underlying tissue.¹ They are generally localized to areas of the body with bony prominences that absorb the pressures of immobility, e.g., elbows, hips, heels, and shoulders.²

Pressure ulcers are classified into stages, based on the severity of the injury. The National Pressure Ulcer Advisory Panel has a [useful document](#) which shows the various stages in both pictures and schematic drawings. [See the last page of this Alert for links to this and other resources.]

Note to Readers:

LTCCC Issue Alerts provide basic information about an issue of concern to nursing home residents.

For further information, please see the Resources and References at the end of the Alert, as well as our website, www.nursinghome411.org.

II. What are the Standards of Care?

While some pressure ulcers are unavoidable, **there “are many ways nursing homes can help prevent or treat pressure ulcers:** changing residents’ positions often, giving proper nutrition, [and] using soft padding to reduce pressure on the skin.”³ In fact, according to the *Journal of Wound, Ostomy & Continence Nursing*, “In the vast majority of cases, appropriate identification and mitigation of risk factors can prevent or minimize pressure ulcer (PU) formation.”⁴ [Emphasis added.]

Nursing homes must meet **mandatory standards of care** in preventing and treating pressure ulcers. There are two fundamental requirements in this regard:

1. **Protect residents from developing pressure ulcers.** Facilities are required to ensure that admitted residents do not develop pressure ulcers while under the facilities’ care, unless it is “unavoidable.” **Unavoidable “means** that the resident developed a pressure ulcer even though the facility had evaluated the resident’s clinical condition and pressure ulcer risk factors; defined and implemented interventions that are consistent with resident needs, goals, and recognized standards of practice; monitored and evaluated the impact of the interventions; and revised the approaches as appropriate.”⁵ [Emphasis added.]

2. **Monitor, treat, and heal existing pressure ulcers.** Nursing homes must “promote healing, prevent infection, and prevent new ulcers from developing” when admitted residents having existing PUs.⁶

III. How Prevalent are Pressure Ulcers?

Most residents, given their vulnerability, are at risk for developing pressure ulcers. Nursing homes have a particular responsibility for ensuring that residents at risk do not develop pressure ulcers unless they are “unavoidable.” As noted above, under Standards of Care, “unavoidable” has a very specific, limited meaning.

According to the latest federal data,⁷ about 85% of nursing home residents are at risk of developing pressure ulcers. Despite the special responsibility that nursing homes have to effectively monitor, prevent and treat residents at risk, 7.3% of U.S. nursing home residents have pressure ulcers.⁸ That is over 93,000 current U.S. nursing home residents.

IV. How Can I Find Out About Pressure Ulcer Rates – and Deficiencies – in My Nursing Home or Those in My State?

Pressure ulcer rates vary widely from nursing home to nursing home. [Nursing Home Compare](http://www.medicare.gov/nursinghomecompare) (<http://www.medicare.gov/nursinghomecompare>) provides information on individual licensed nursing homes across the country. For each nursing home, pressure ulcer rates are provided for both short-term and long-term stay residents under “Quality of resident care.” It is important to note that this information is self-reported by facilities and unaudited for accuracy by the government. LTCCC recommends focusing on long-stay measures, since we believe that they are more likely to be indicative of a facility’s general practices, on an on-going basis, with residents who are vulnerable.

In order to provide the public with relevant information on pressure ulcers, LTCCC’s [Nursing Home Information & Data Page](#) (on our www.nursinghome411.org website) has searchable and downloadable files on every licensed nursing home in the country:

US Nursing Home Pressure Ulcer Rates for Long-Stay Residents

This file provides individual folders for every state and Washington, DC. Each folder has information on the pressure ulcer rate for long-stay residents at risk for every licensed facility. This list is searchable by facility name, city, and zip code. It can also be sorted to see which facilities have the highest – and lowest – pressure ulcer rates.

US Nursing Home Citations for Substandard Pressure Ulcer Care

This file provides individual folders for every state and Washington, DC. Each folder provides the names of each facility in the state that have been cited for substandard pressure ulcer care in the last three years (as of the processing date indicated). It is searchable by facility name, address, city and zip code.

“Pressure ulcers are serious medical conditions and one of the important measures of the quality of clinical care in nursing homes.”

-U.S. Centers for Disease Control & Prevention

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All of the data are from the federal Medicare website. They have been formatted to make it easy for the public to access relevant information on nursing homes in their communities and states.

V. Case Study of a Resident Who Suffered From Pressure Ulcers

When a nursing home is cited by surveyors for failing to meet minimum standards, the citation is described in a Statement of Deficiencies (SoD). All SoDs are posted for public viewing in the nursing home profiles on [Nursing Home Compare](#). A July 2017 inspection of The Willows at Ramapo Rehab & Nursing Center in Suffern, New York, illustrates one such instance of a citation for substandard pressure ulcer care.

In this nursing home, surveyors determined that the “facility did not provide the necessary care and treatment in a timely manner for 1 of 3 residents... [they] reviewed for pressure ulcers. Specifically, a decline in the resident's caloric and protein intake was not promptly addressed to promote healing of an existing pressure ulcer.”

The record indicates that resident’s weight declined from 132 pounds to 121 pounds between June 7, 2016, and December 7, 2016.⁹ On December 8, 2016, the nursing home found a Deep Tissue Injury (DTI) on the resident’s right heel. The care plan noted that the goal was to have the DTI resolved by the next review date by providing protein, vitamin, and mineral supplements to promote healing. However, rather than gaining weight, a subsequent assessment showed the resident’s weight further declined to 111 pounds. At that point, the resident had two Stage 3 pressure ulcers.

The Medication Administration Records from January to June 2017 showed that the resident’s intake of a high calorie protein supplement declined during the period. The dietician’s notes established that, on June 27, 2017, the resident’s average intake was just around 743 calories per day—half of the resident’s requirement. The dietitian recommended that the resident’s diet be altered to a regular diet and that the high calorie supplement be substituted. When asked why there was a delay in addressing the resident’s supplement intake, the dietitian stated that she did not recall if she was informed by nurses of the issue.

“...too often, even when resident abuse or neglect are cited, the problems are not identified by surveyors as having caused harm to the nursing home’s residents.”

VI. A Note on Nursing Home Oversight & Accountability

Notwithstanding the finding of substandard care and the decline in the resident’s condition, this deficiency was classified as not causing any “actual harm” by state surveyors.

The accurate identification of substandard nursing home care is a longstanding issue of public concern. In addition, too often, even when resident abuse or neglect are cited, the problems are not identified by surveyors as having caused harm to the nursing home’s residents. Recent studies by LTCCC have indicated that states only identify resident harm about 5% of the time that they cite a facility for substandard care, abuse or neglect. In respect to pressure ulcers, which can be utterly devastating to residents, state surveyors only cite nursing homes the equivalent of less than 3% of

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the time that a resident has a pressure ulcer. Even when states do cite a facility for inadequate pressure ulcer care or prevention, they only identify this as harmful to residents about 25% of the time.¹⁰

VII. References for More Information & Help

- The [National Pressure Ulcer Advisory Panel](#) has a helpful resource on pressure ulcer identification and staging at: <http://www.npuap.org/wp-content/uploads/2014/09/NPUAP-Staging-Poster.pdf>.
- The [U.S. National Library of Medicine](#) has excellent, consumer-friendly resources on pressure ulcers in both English and Spanish at: <https://vsearch.nlm.nih.gov/vivisimo/cgi-bin/query-meta?v%3Aproject=medlineplus&v%3Asources=medlineplus-bundle&query=pressure+ulcers>.
- [LTCCC's homepage](#) has information on pressure ulcer rates, citations and other quality indicators for all U.S. nursing homes, fact sheets and other resources on quality standards and more. See www.nursinghome411.org.

¹ Nat'l Pressure Ulcer Advisory Panel, *NPUAP Pressure Ulcer Stages/Categories*, <http://www.npuap.org/wp-content/uploads/2012/01/NPUAP-Pressure-Ulcer-Stages-Categories.pdf> (last visited 09/08/2017).

² *Id.* Pressure ulcers can also be associated with poor nutrition and hydration, as well as medical conditions that restrict blood flow. See *Bedsore (pressure ulcers)*, MayoClinic.Com, <http://www.mayoclinic.org/diseases-conditions/bed-sores/symptoms-causes/dxc-20315617> (last visited 09/08/2017) (highlighting that pressure sore may also occur from friction and shear).

³ Nursing Home Compare, *What information can you get about nursing homes?*, <https://www.medicare.gov/NursingHomeCompare/About/nhcinformation.html> (last visited 09/11/2017) (accessing the information requires selecting “Quality of resident care” and scrolling to “Percentage of short-stay residents with pressure ulcers that are new or worsened”).

⁴ “Unavoidable Pressure Injury: State of the Science and Consensus Outcomes,” *Journal of Wound, Ostomy & Continence Nursing* (July/August 2014), http://journals.lww.com/jwoconline/Abstract/2014/07000/Unavoidable_Pressure_Injury_State_of_the_Science.6.aspx (visited September 2017).

⁵ What is an Unavoidable Pressure Ulcer?, *The WoundSource Blog* (March 18th, 2014), <http://www.woundsource.com/blog/what-unavoidable-pressure-ulcer> (last visited September 2017), discussing federal (CMS) requirements. See also 42 C.F.R. § 483.25(b)(1) (noting that the standard of care is based on a comprehensive assessment of the resident).

⁶ *Id.*

⁷ This article was written in October 2017. Data are for 2017 Q2. For the most current data on a specific facility, visit the [Nursing Home Compare](#) website at <https://www.medicare.gov/nursinghomecompare/search.html>.

⁸ See CMS, *M0150: Skin Conditions - Risk of Pressure Ulcers*, <https://www.cms.gov/Research-Statistics-Data-and-Systems/Computer-Data-and-Systems/Minimum-Data-Set-3-0-Public-Reports/Minimum-Data-Set-3-0-Frequency-Report.html> (last visited 09/11/2017) (accessing the data requires selecting and submitting “Second Quarter 2017,” then selecting the variable mentioned); *Id.* at *M0210: Skin Conditions - Risk of Pressure Ulcers*.

⁹ CMS, *Statement of Deficiency for The Willows at Ramapo Rehab & Nursing Center* (July 7, 2017), <https://www.medicare.gov/nursinghomecompare/InspectionReportDetail.aspx?ID=335148&SURVEYDATE=07/07/2017&INSPTYPE=STD&profTab=1&state=NY&lat=0&lng=0&name=THE%2520WILLOWS%2520AT%2520RAMAPO%2520REHAB%2520AND%2520NURSING%2520CENTER&Distn=0.0>.

¹⁰ Data are from Nursing Home Compare discussed in two LTCCC reports: *The Identification of Resident Harm in Nursing Home Deficiencies: Observations & Insights* (2017) and *Safeguarding NH Residents & Program Integrity: A National Review of State Survey Agency Performance* (2015). Both reports, and supporting data, are available at <http://nursinghome411.org/news-reports/lccc-reports/>.